

Under the provisions of Section 413.031 of the Texas Workers' Compensation Act, Title 5, Subtitle A of the Texas Labor Code, effective June 17, 2001 and Commission Rule 133.305, titled Medical Dispute Resolution-General, and 133.307, titled Medical Dispute Resolution of a Medical Fee Dispute, a review was conducted by the Division regarding a medical fee dispute between the requestor and the respondent named above. This dispute was received on 3-31-03.

I. DISPUTE

Whether there should be reimbursement for CPT code 99282 –Emergency Room visit rendered on 7-2-02.

II. FINDINGS

- a CPT code 99282 is described as “Emergency department visit for the evaluation and management of a patient which requires these three key components; an expanded problem focused history; an expanded problem focused examination; and medical decision making of low complexity.”
- b The *Medical Fee Guideline*, MFG, has set a MAR of \$53.00 for 99282.
- c The insurance carrier denied reimbursement based upon “N- Charge for Subsequent Emergency Room Visit after the initial visit that does not meet the definition of emergency service and care.”
- d The total amount in dispute is \$53.00.
- e The emergency room visit report supports billing of 99282 per MFG, reimbursement of \$53.00 is recommended.

III. DECISION & ORDER

Based upon the review of the disputed healthcare services within this request, the Division has determined that the requestor **is** entitled to reimbursement of \$53.00 for CPT code 99282. Pursuant to Sections 402.042, 413.016, 413.031, and 413.019 the Division hereby ORDERS the Respondent to remit **\$53.00** plus all accrued interest due at the time of payment to the Requestor within 20 days receipt of this Order.

The above Findings, Decision and Order are hereby issued this 20th day of January 2004.

Elizabeth Pickle
Medical Dispute Resolution Officer
Medical Review Division